

Patent Application Data Sheet

Application Information

Application No::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R? No

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form

(CRF)?::

Title:: METHOD AND SYSTEM FOR AUTOMATED
MEDICAL RECORDS PROCESSING

Attorney Docket Number:: 02,104-A

Request for Early Publication?:: NO

Request for Non-Publication?:: YES

Suggested Drawing Figure:: 4

Total Formal Drawing Sheets:: 15

Small Entity:: YES

Petition included?:: NO

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent App.?:: NO

Applicant Information

Applicant Authority type:: Inventor

Primary Citizenship Country: US

Status:: Full Capacity

Given Name:: David

Middle Name:: E.

Family Name:: Stern, M.D.

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State or Province of Residence::	IL
Country of Residence::	USA
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City of mailing address::	Caledonia
State or Province of mailing address::	IL
Postal or Zip Code of mailing address::	61011
Applicant Authority type::	2 nd Co-Inventor
Primary Citizenship Country:	US
Status::	Full Capacity
Given Name::	Wayne
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Family Name::	Pearson
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State or Province of Residence::	IL
Country of Residence::	USA
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City of mailing address::	Crystal Lake
State or Province of mailing address::	IL
Postal or Zip Code of mailing address::	60014
Applicant Authority type::	3 rd Co-Inventor
Primary Citizenship Country:	US
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Representative Information

Representative Customer Number::	32097	Lesavich High-Tech Law Group, P.C.
Representative Designation::	Registration Number::	Representative Name::
Primary	43,749	Stephen Lesavich

Domestic Priority Information

Application::	Continuity Type:	Parent Application::	Parent Filing Date::
This Application	<i>Is an application claiming the benefit under 35 USC 119(e)</i>	60/442,083	10/29/02 October 29, 2002

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name:: Practice Velocity, LLC
Street of mailing
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Mailing Address:: IL
Country of Mailing Address:: USA
Postal or Zip Code of
Mailing Address:: 61008